

SEVENTY THIRD DAY

MORNING SESSION

Senate Chamber, Olympia
Wednesday, March 27, 2019

The Senate was called to order at 10:04 a.m. by the President of the Senate, Lt. Governor Habib presiding. The Secretary called the roll and announced to the President that all senators were present with the exceptions of Senators Sheldon, Walsh and Wilson, L.

The Washington National Guard Joint Color Guard presented the Colors.

First Sergeant Miss Tracey Thurston of the Washington Air National Guard performed the National Anthem.

The prayer was offered by Colonel Don Brewer, Chaplain Washington Army National Guard.

INTRODUCTION OF SPECIAL GUESTS

The President welcomed and introduced Major General Bret Daugherty and Colonel Jeff Sabatine, of the Washington National Guard, who were seated at the rostrum.

The President called upon the Secretary to read the journal of the preceding day.

MOTIONS

On motion of Senator Liias, the reading of the Journal of the previous day was dispensed with and it was approved.

On motion of Senator Liias, Senate Rule 20 was suspended for the remainder of the day to allow consideration of additional floor resolutions.

EDITOR'S NOTE: Senate Rule 20 limits consideration of floor resolutions not essential to the operation of the Senate to one per day during regular daily sessions.

MOTION

On motion of Senator Liias, the Senate advanced to the first order of business.

REPORTS OF STANDING COMMITTEES

March 26, 2019

SHB 1071 Prime Sponsor, Committee on Innovation, Technology & Economic Development: Protecting personal information. Reported by Committee on Environment, Energy & Technology

MAJORITY recommendation: Do pass as amended. Signed by Senators Hobbs; Das; Brown; Billig; Fortunato, Assistant Ranking Member, Environment; Palumbo, Vice Chair; Carlyle, Chair; Liias; McCoy; Nguyen; Rivers; Short and Wellman.

MINORITY recommendation: Do not pass. Signed by Senator Ericksen, Ranking Member.

Referred to Committee on Ways & Means.

March 26, 2019

HB 1092 Prime Sponsor, Representative Fey: Concerning the compensation of commissioners of certain metropolitan park districts. Reported by Committee on Local Government

MAJORITY recommendation: Do pass. Signed by Senators Takko, Chair; Salomon, Vice Chair; Short, Ranking Member and Lovelett.

MINORITY recommendation: That it be referred without recommendation. Signed by Senator Honeyford.

Referred to Committee on Rules for second reading.

March 26, 2019

E2SHB 1105 Prime Sponsor, Committee on Appropriations: Protecting taxpayers from home foreclosure. Reported by Committee on Local Government

MAJORITY recommendation: Do pass as amended. Signed by Senators Takko, Chair; Salomon, Vice Chair; Short, Ranking Member; Honeyford and Lovelett.

Referred to Committee on Rules for second reading.

March 26, 2019

E2SHB 1112 Prime Sponsor, Committee on Appropriations: Reducing greenhouse gas emissions from hydrofluorocarbons. Reported by Committee on Environment, Energy & Technology

MAJORITY recommendation: Do pass. Signed by Senators Carlyle, Chair; Palumbo, Vice Chair; Billig; Das; Hobbs; Liias; McCoy; Nguyen; Rivers and Wellman.

MINORITY recommendation: Do not pass. Signed by Senator Short.

MINORITY recommendation: That it be referred without recommendation. Signed by Senators Ericksen, Ranking Member Fortunato, Assistant Ranking Member, Environment.

Referred to Committee on Ways & Means.

March 26, 2019

SHB 1148 Prime Sponsor, Committee on Consumer Protection & Business: Concerning architect registration. Reported by Committee on Labor & Commerce

MAJORITY recommendation: Do pass. Signed by Senators Keiser, Chair; Conway, Vice Chair; King, Ranking Member; Braun; Saldaña; Walsh and Wellman.

Referred to Committee on Rules for second reading.

March 26, 2019

HB 1208 Prime Sponsor, Representative Vick: Concerning public accounting services. Reported by Committee on Labor &

Commerce

MAJORITY recommendation: Do pass. Signed by Senators Keiser, Chair; Conway, Vice Chair; King, Ranking Member; Braun; Saldaña; Walsh and Wellman.

Referred to Committee on Rules for second reading.

March 26, 2019

ESHB 1332 Prime Sponsor, Committee on Environment & Energy: Concerning updating and streamlining energy facility site evaluation council operations. Reported by Committee on Environment, Energy & Technology

MAJORITY recommendation: Do pass as amended. Signed by Senators Wellman; Nguyen; McCoy; Liias; Hobbs; Das; Billig; Palumbo, Vice Chair Carlyle, Chair.

MINORITY recommendation: That it be referred without recommendation. Signed by Senator Fortunato, Assistant Ranking Member, Environment.

MINORITY recommendation: Do not pass. Signed by Senators Ericksen, Ranking Member; Brown and Short.

Referred to Committee on Rules for second reading.

March 26, 2019

HB 1341 Prime Sponsor, Representative Hudgins: Concerning the use of unmanned aerial systems near certain protected marine species. Reported by Committee on Environment, Energy & Technology

MAJORITY recommendation: Do pass as amended. Signed by Senators Wellman; Rivers; Nguyen; McCoy; Liias; Hobbs; Das; Billig; Palumbo, Vice Chair Carlyle, Chair.

MINORITY recommendation: Do not pass. Signed by Senators Ericksen, Ranking Member and Short.

MINORITY recommendation: That it be referred without recommendation. Signed by Senator Fortunato, Assistant Ranking Member, Environment.

Referred to Committee on Rules for second reading.

March 26, 2019

SHB 1360 Prime Sponsor, Committee on Transportation: Concerning abstracts of driving records. Reported by Committee on Transportation

MAJORITY recommendation: Do pass. Signed by Senators Zeiger; Hobbs, Chair; Saldaña, Vice Chair; King, Ranking Member; Das; Lovelett; Nguyen; O'Ban; Padden; Randall; Takko and Wilson, C..

Referred to Committee on Rules for second reading.

March 26, 2019

HB 1397 Prime Sponsor, Representative Slatter: Encouraging the use of electric or hybrid-electric aircraft for regional air travel. Reported by Committee on Transportation

MAJORITY recommendation: Do pass as amended. Signed by Senators Zeiger; Wilson, C.; Takko; Randall; O'Ban; Nguyen; Lovelett; Das; King, Ranking Member;

Saldaña, Vice Chair Hobbs, Chair.

MINORITY recommendation: That it be referred without recommendation. Signed by Senator Padden.

Referred to Committee on Rules for second reading.

March 25, 2019

SHB 1406 Prime Sponsor, Committee on Housing, Community Development & Veterans: Encouraging investments in affordable and supportive housing. Reported by Committee on Housing Stability & Affordability

MAJORITY recommendation: Do pass as amended. Signed by Senators Kuderer, Chair; Das, Vice Chair; Zeiger, Ranking Member; Darneille; Saldaña and Warnick.

Referred to Committee on Ways & Means.

March 26, 2019

ESHB 1428 Prime Sponsor, Committee on Environment & Energy: Concerning the disclosure of attributes of electricity products. Reported by Committee on Environment, Energy & Technology

MAJORITY recommendation: Do pass as amended. Signed by Senators Ericksen, Ranking Member; Fortunato, Assistant Ranking Member, Environment; Billig; Brown; Das; Hobbs; Liias; McCoy; Nguyen; Rivers; Short; Palumbo, Vice Chair; Carlyle, Chair and Wellman.

Referred to Committee on Rules for second reading.

March 26, 2019

2SHB 1444 Prime Sponsor, Committee on Appropriations: Concerning appliance efficiency standards. Reported by Committee on Environment, Energy & Technology

MAJORITY recommendation: Do pass as amended. Signed by Senators Das; Hobbs; Liias; McCoy; Nguyen; Wellman; Billig Carlyle, Chair.

MINORITY recommendation: That it be referred without recommendation. Signed by Senator Fortunato, Assistant Ranking Member, Environment.

MINORITY recommendation: Do not pass. Signed by Senators Ericksen, Ranking Member; Brown; Rivers and Short.

Referred to Committee on Ways & Means.

March 26, 2019

SHB 1469 Prime Sponsor, Committee on Transportation: Modifying provisions relating to approaching emergency or work zones and tow truck operators. Reported by Committee on Transportation

MAJORITY recommendation: Do pass. Signed by Senators Zeiger; Wilson, C.; Takko; Randall; Padden; O'Ban; Nguyen; Lovelett; Das; King, Ranking Member; Saldaña, Vice Chair Hobbs, Chair.

Referred to Committee on Rules for second reading.

March 26, 2019

SEVENTY THIRD DAY, MARCH 27, 2019

2019 REGULAR SESSION

SHB 1480 Prime Sponsor, Committee on Environment & Energy: Streamlining the permitting process for disposing of dredged materials. Reported by Committee on Environment, Energy & Technology

MAJORITY recommendation: Do pass. Signed by Senators Carlyle, Chair; Palumbo, Vice Chair; Fortunato, Assistant Ranking Member, Environment; Billig; Das; Hobbs; Liias; McCoy; Nguyen; Rivers; Short and Wellman.

MINORITY recommendation: Do not pass. Signed by Senator Ericksen, Ranking Member.

Referred to Committee on Rules for second reading.

March 26, 2019

HB 1486 Prime Sponsor, Representative Mosbrucker: Concerning delegation of inspection duties for factory built housing and commercial structures. Reported by Committee on Labor & Commerce

MAJORITY recommendation: Do pass. Signed by Senators Keiser, Chair; Conway, Vice Chair; King, Ranking Member; Braun; Saldaña; Walsh and Wellman.

Referred to Committee on Rules for second reading.

March 26, 2019

3SHB 1498 Prime Sponsor, Committee on Appropriations: Expanding affordable, resilient broadband service to enable economic development, public safety, health care, and education in Washington's communities. Reported by Committee on Environment, Energy & Technology

MAJORITY recommendation: Do pass as amended. Signed by Senators Liias; Hobbs; Das; Brown; Billig; Fortunato, Assistant Ranking Member, Environment; Palumbo, Vice Chair; Carlyle, Chair; McCoy; Nguyen; Rivers; Short and Wellman.

MINORITY recommendation: Do not pass. Signed by Senator Ericksen, Ranking Member.

Referred to Committee on Ways & Means.

March 26, 2019

ESHB 1510 Prime Sponsor, Committee on Transportation: Governing the use of narrow track vehicles. Reported by Committee on Transportation

MAJORITY recommendation: Do pass. Signed by Senators Hobbs, Chair; King, Ranking Member; Das; Nguyen; O'Ban; Padden; Randall; Takko; Wilson, C. and Zeiger.

MINORITY recommendation: That it be referred without recommendation. Signed by Senators Lovelett Saldaña, Vice Chair.

Referred to Committee on Rules for second reading.

March 26, 2019

HB 1533 Prime Sponsor, Representative Mosbrucker: Making information about domestic violence resources available in the workplace. Reported by Committee on Labor & Commerce

MAJORITY recommendation: Do pass. Signed by Senators Keiser, Chair; Conway, Vice Chair; King, Ranking Member; Braun; Saldaña; Walsh and Wellman.

Referred to Committee on Rules for second reading.

March 26, 2019

E2SHB 1543 Prime Sponsor, Committee on Appropriations: Concerning sustainable recycling. Reported by Committee on Environment, Energy & Technology

MAJORITY recommendation: Do pass as amended. Signed by Senators Palumbo, Vice Chair; Billig; Das; Hobbs; Liias; McCoy; Nguyen; Wellman; Fortunato, Assistant Ranking Member, Environment Carlyle, Chair.

MINORITY recommendation: Do not pass. Signed by Senators Ericksen, Ranking Member; Brown; Rivers and Short.

Referred to Committee on Ways & Means.

March 26, 2019

ESHB 1557 Prime Sponsor, Committee on Commerce & Gaming: Concerning liquor licenses. Reported by Committee on Labor & Commerce

MAJORITY recommendation: Do pass. Signed by Senators Keiser, Chair; Conway, Vice Chair; King, Ranking Member; Braun; Saldaña; Walsh and Wellman.

Referred to Committee on Rules for second reading.

March 26, 2019

EHB 1563 Prime Sponsor, Representative Jenkin: Concerning liquor-related privileges of students enrolled in certain degree programs. Reported by Committee on Labor & Commerce

MAJORITY recommendation: Do pass. Signed by Senators Keiser, Chair; Conway, Vice Chair; King, Ranking Member; Braun; Saldaña; Walsh and Wellman.

Referred to Committee on Rules for second reading.

March 26, 2019

ESHB 1569 Prime Sponsor, Committee on Environment & Energy: Concerning marketing the degradability of products. Reported by Committee on Environment, Energy & Technology

MAJORITY recommendation: Do pass. Signed by Senators McCoy; Liias; Hobbs; Das; Billig; Palumbo, Vice Chair; Carlyle, Chair; Nguyen; Rivers and Wellman.

MINORITY recommendation: That it be referred without recommendation. Signed by Senator Fortunato, Assistant Ranking Member, Environment.

MINORITY recommendation: Do not pass. Signed by Senators Ericksen, Ranking Member; Brown and Short.

Referred to Committee on Rules for second reading.

March 26, 2019

ESHB 1578 Prime Sponsor, Committee on Environment &

Energy: Reducing threats to southern resident killer whales by improving the safety of oil transportation. Reported by Committee on Environment, Energy & Technology

MAJORITY recommendation: Do pass as amended. Signed by Senators Das; Liias; McCoy; Nguyen; Wellman; Billig; Palumbo, Vice Chair Carlyle, Chair.

MINORITY recommendation: That it be referred without recommendation. Signed by Senator Fortunato, Assistant Ranking Member, Environment.

MINORITY recommendation: Do not pass. Signed by Senators Ericksen, Ranking Member; Brown; Short and Rivers.

Referred to Committee on Ways & Means.

March 26, 2019

HB 1583 Prime Sponsor, Representative Kraft: Concerning mosquito control districts. Reported by Committee on Local Government

MAJORITY recommendation: Do pass. Signed by Senators Lovelett; Honeyford; Short, Ranking Member; Salomon, Vice Chair Takko, Chair.

Referred to Committee on Rules for second reading.

March 26, 2019

HB 1634 Prime Sponsor, Representative Goehner: Requiring property sold in tax lien foreclosure proceedings to be sold as is. Reported by Committee on Local Government

MAJORITY recommendation: Do pass. Signed by Senators Takko, Chair; Salomon, Vice Chair; Short, Ranking Member; Honeyford and Lovelett.

Referred to Committee on Rules for second reading.

March 26, 2019

SHB 1909 Prime Sponsor, Committee on Labor & Workplace Standards: Concerning the confidentiality of industrial insurance claim records. Reported by Committee on Labor & Commerce

MAJORITY recommendation: Do pass. Signed by Senators Keiser, Chair; Conway, Vice Chair; King, Ranking Member; Braun; Saldaña; Walsh and Wellman.

Referred to Committee on Rules for second reading.

March 26, 2019

HB 1918 Prime Sponsor, Representative Santos: Concerning community preservation and development authorities. Reported by Committee on Local Government

MAJORITY recommendation: Do pass. Signed by Senators Lovelett; Honeyford; Short, Ranking Member; Salomon, Vice Chair Takko, Chair.

Referred to Committee on Rules for second reading.

MOTION

On motion of Senator Liias, all measures listed on the Standing Committee report were referred to the committees as designated.

MOTION

On motion of Senator Liias, the Senate advanced to the fifth order of business.

INTRODUCTION AND FIRST READING

SB 5994 by Senator Palumbo

AN ACT Relating to business and occupation tax simplification and relief; amending RCW 82.04.250, 82.04.270, 82.04.240, 82.04.240, 82.04.290, 82.04.230, and 82.32.790; adding a new section to chapter 82.04 RCW; repealing RCW 82.04.2404, 82.04.255, 82.04.257, 82.04.260, 82.04.263, 82.04.272, 82.04.280, 82.04.285, 82.04.286, 82.04.2905, 82.04.2906, 82.04.2907, 82.04.2908, 82.04.2909, 82.04.294, and 82.04.298; creating a new section; providing an effective date; and providing a contingent expiration date.

Referred to Committee on Ways & Means.

SJR 8210 by Senator Palumbo

Amending the Constitution to require a supermajority vote of the legislature or voter approval to increase state business and occupation taxes.

Referred to Committee on Ways & Means.

MOTIONS

On motion of Senator Liias, all measures listed on the Introduction and First Reading report were referred to the committees as designated.

On motion of Senator Liias, the Senate advanced to the eighth order of business.

MOTION

Senator Warnick moved adoption of the following resolution:

SENATE RESOLUTION
8635

By Senators Warnick, Bailey, Becker, Billig, Braun, Brown, Carlyle, Cleveland, Conway, Darneille, Das, Dhingra, Ericksen, Fortunato, Frockt, Hasegawa, Hawkins, Hobbs, Holy, Honeyford, Hunt, Keiser, King, Kuderer, Liias, Lovelett, McCoy, Mullet, Nguyen, O'Ban, Padden, Palumbo, Pedersen, Randall, Rivers, Rolfes, Saldaña, Salomon, Schoesler, Sheldon, Short, Takko, Van De Wege, Wagoner, Walsh, Wellman, Wilson, C., Wilson, L., and Zeiger

WHEREAS, Ryan Shane Thompson was born and raised in Walla Walla, Washington, and was a graduate of Walla Walla High School and Central Washington University; and

WHEREAS, Deputy Ryan Thompson served our state and his community with dedication, professionalism, and honor; and

WHEREAS, Deputy Ryan Thompson began his career in law enforcement as a reserve deputy with Kittitas County in 2004; and

WHEREAS, Ryan Thompson also served as a corrections officer. He joined the Central Washington University Police Department in 2007, returning to the Kittitas County Sheriff's Office in 2013 where he spent the remainder of his career; and

WHEREAS, Deputy Ryan Thompson was a radiant and loving

SEVENTY THIRD DAY, MARCH 27, 2019

2019 REGULAR SESSION

family man, dedicated to his family first, and always; and

WHEREAS, Deputy Ryan Thompson protected his community with the same vigilance. He was known for his positive attitude regardless of the situation, treating all with an innate kindness, and being one who would do anything for a friend; and

WHEREAS, Deputy Ryan Thompson was known for his generosity of spirit and enjoyed spending time with friends and colleagues at the Roslyn Fire Department, especially when pancakes were on the menu; and

WHEREAS, Deputy Ryan Thompson leaves behind a legacy of fond memories with those who knew and loved him. He is survived by his wife Sara and three children, Madison, Pepper, and Archer;

NOW, THEREFORE, BE IT RESOLVED, That the Washington State Senate express its deepest condolences to the family, friends, colleagues, and community that have lost Deputy Ryan Thompson; and

BE IT FURTHER RESOLVED, That the Senate join the people of the State of Washington in expressing our gratitude for the dedicated service of Deputy Ryan Thompson and remember the man, father, and husband who gave his life for the community he cherished; and

BE IT FURTHER RESOLVED, That the Senate express its appreciation to the brave women and men who protect our state every day as members of local law enforcement and particularly Deputy Ryan Thompson's brothers and sisters at the Kittitas County Sheriff's Office; and

BE IT FURTHER RESOLVED, That copies of this resolution be immediately transmitted by the Secretary of the Senate to the surviving family members of Deputy Ryan Thompson, Kittitas County Sheriff Gene Dana, and members of the Kittitas County Sheriff's Office.

Senators Warnick and Liias spoke in favor of adoption of the resolution.

The President declared the question before the Senate to be the adoption of Senate Resolution No. 8635.

The motion by Senator Warnick carried and the resolution was adopted by voice vote.

MOTION

On motion of Senator Liias, the names of all members were added to Senate Resolution No. 8635.

INTRODUCTION OF SPECIAL GUESTS

The President welcomed and introduced Kittitas County Commissioners: Mr. Cory Wright, Ms. Laura Osiaidez and Mr. Brett Wachsmith who were seated in the gallery. The President also introduced former Kittitas County Commissioner Paul Jewell and State Director for the Office of U.S. Senator Patty Murray, Shawn Bills, who were seated in the gallery.

EDITOR'S NOTE: Kittitas County Sheriff's Deputy Ryan Thompson and City of Kittitas Police Officer Benito Kellen Chavez were shot during the evening of Tuesday, March 19, 2019, responding to a reckless driving complaint. The officers attempted a traffic stop which became a vehicle pursuit that ended in Kittitas where Deputy Ryan Thompson, a 14 year veteran of the department, was shot and died later in the evening.

On Thursday, March 28, 2019, following a procession through Ellensburg, a memorial service for Kittitas County Sheriff's Deputy Ryan Thompson was held at the Dean Nicholson Pavilion on the campus of Central Washington University. At the

direction of Governor Inslee, the flags of Washington State and the United States were lowered to half-staff on Thursday, March 28, 2019 in honor of Deputy Thompson and in recognition of his and his family's sacrifice.

MOTION

Senator Hobbs moved adoption of the following resolution:

SENATE RESOLUTION 8636

By Senators Hobbs, Zeiger, Bailey, Conway, Van De Wege, King, Fortunato, Liias, Billig, Warnick, Pedersen, Cleveland, Takko, Braun, Short, Honeyford, Sheldon, Hasegawa, McCoy, Saldaña, Schoesler, Hawkins, and Walsh

WHEREAS, More than eight thousand men and women of the Washington National Guard continue to serve the country as guardians of American interests at home and abroad; and

WHEREAS, These recognized leaders in state, regional, and national preparedness, who reside in nearly every legislative district throughout Washington, volunteer their time and put personal lives aside when the needs of the people of Washington state arise; and

WHEREAS, The Guard always answers the state's call in response to all emergency efforts to protect lives and property, and recently mobilized more than one thousand Guardsmen to serve at multiple wildfires in Washington last summer and to King County to assist first responders after massive snow storms; and

WHEREAS, The Guard continues to train and prepare for both natural disasters and threats to our national security, including cyber threats; and

WHEREAS, The Guard continues to improve the lives of Washington's young adults, many on the brink of dropping out of school, through its Washington Youth Academy; and

WHEREAS, The Guard adds value to communities by opening its Readiness Centers for community and youth activities, and uses these facilities to enhance education, add to quality of life, and increase economic vitality; and

WHEREAS, Washington National Guard soldiers and airmen continue to provide critical support to federal missions around the world and are willing to make the ultimate sacrifice to protect our freedoms and enhance our safety;

NOW, THEREFORE, BE IT RESOLVED, That the Washington state Senate express its thanks and appreciation to the devoted families and dedicated employers of our Washington National Guard soldiers and airmen and airwomen for their support, without whom the Guard's missions could not be successful; and

BE IT FURTHER RESOLVED, That the Senate recognize the value and dedication of a strong Washington National Guard to the viability, economy, safety, security, and well-being of this state, both through the outstanding performance of its state emergency and disaster relief mission, and through the continued benefit to local communities by the presence of productively employed, drug-free, well-equipped, and trained Guard units and the readiness centers and armories that house them; and

BE IT FURTHER RESOLVED, That copies of this resolution be immediately transmitted by the Secretary of the Senate to the Adjutant General of the Washington National Guard, the Governor of the state of Washington, the Secretaries of the United States Army and Air Force, and the President of the United States.

Senators Hobbs, Zeiger and Kuderer spoke in favor of adoption of the resolution.

The President declared the question before the Senate to be the adoption of Senate Resolution No. 8636.

The motion by Senator Hobbs carried and the resolution was adopted by voice vote.

The senate rose and recognized the officers, staff and members of the Washington National Guard, the Army National Guard and the Air Guard in gratitude for their service.

MOTION

On motion of Senator Liias, Substitute House Bill No. 1075 was removed from the Consent Calendar and placed on the day's Second Reading Calendar.

PERSONAL PRIVILEGE

Senator Honeyford: "Well, thank you Mr. President. We had the resolution honoring the deputy that was shot and killed in Kittitas County and I want to bring the body's attention to the *Behind the Badge Foundation* that supports the families of fallen law enforcement officers. And, I understand that they were there with the family either late that night or the next morning and so this is a great organization that supports our law enforcement and their families. And I know they have an event every year, I hate to call it a gala, but it's a big party, I guess, to raise funds to help support the work of the *Behind the Badge Foundation*. I also want to mention that we have a law enforcement memorial behind the Temple of Justice, and Deputy Thompson's name will be added and that is the second name from Klickitat County. So, thank you Mr. President."

MOTION

At 10:42 a.m., on motion of Senator Liias, the Senate was declared to be at ease subject to the call of the President.

Senator Becker announced a meeting of the Republican Caucus immediately upon going at ease.

The Senate was called to order at 11:52 a.m. by President Habib.

MOTION

On motion of Senator Liias, the Senate advanced to the seventh order of business.

THIRD READING CONFIRMATION OF GUBERNATORIAL APPOINTMENTS

MOTION

Senator Carlyle moved that Theodore R. Willhite, Senate Gubernatorial Appointment No. 9134, be confirmed as a member of the Recreation and Conservation Funding Board.

Senator Carlyle spoke in favor of the motion.

APPOINTMENT OF THEODORE R. WILLHITE

The President declared the question before the Senate to be the confirmation of Theodore R. Willhite, Senate Gubernatorial

Appointment No. 9134, as a member of the Recreation and Conservation Funding Board.

MOTION

On motion of Senator Rivers, Senators Sheldon, Walsh and Wilson, L. were excused.

The Secretary called the roll on the confirmation of Theodore R. Willhite, Senate Gubernatorial Appointment No. 9134, as a member of the Recreation and Conservation Funding Board and the appointment was confirmed by the following vote: Yeas, 46; Nays, 0; Absent, 0; Excused, 3.

Voting yea: Senators Bailey, Becker, Billig, Braun, Brown, Carlyle, Cleveland, Conway, Darneille, Das, Dhingra, Ericksen, Fortunato, Frockt, Hasegawa, Hawkins, Hobbs, Holy, Honeyford, Hunt, Keiser, King, Kuderer, Liias, Lovelett, McCoy, Mullet, Nguyen, O'Ban, Padden, Palumbo, Pedersen, Randall, Rivers, Rolfes, Saldaña, Salomon, Schoesler, Short, Takko, Van De Wege, Wagoner, Warnick, Wellman, Wilson, C. and Zeiger

Excused: Senators Sheldon, Walsh and Wilson, L.

Theodore R. Willhite, Senate Gubernatorial Appointment No. 9134, having received the constitutional majority was declared confirmed as a member of the Recreation and Conservation Funding Board.

THIRD READING CONFIRMATION OF GUBERNATORIAL APPOINTMENTS

MOTION

Senator Liias moved that Michael S. Shiosaki, Senate Gubernatorial Appointment No. 9132, be confirmed as a member of the Recreation and Conservation Funding Board.

Senator Liias spoke in favor of the motion.

APPOINTMENT OF MICHAEL S. SHIOSAKI

The President declared the question before the Senate to be the confirmation of Michael S. Shiosaki, Senate Gubernatorial Appointment No. 9132, as a member of the Recreation and Conservation Funding Board.

The Secretary called the roll on the confirmation of Michael S. Shiosaki, Senate Gubernatorial Appointment No. 9132, as a member of the Recreation and Conservation Funding Board and the appointment was confirmed by the following vote: Yeas, 46; Nays, 0; Absent, 0; Excused, 3.

Voting yea: Senators Bailey, Becker, Billig, Braun, Brown, Carlyle, Cleveland, Conway, Darneille, Das, Dhingra, Ericksen, Fortunato, Frockt, Hasegawa, Hawkins, Hobbs, Holy, Honeyford, Hunt, Keiser, King, Kuderer, Liias, Lovelett, McCoy, Mullet, Nguyen, O'Ban, Padden, Palumbo, Pedersen, Randall, Rivers, Rolfes, Saldaña, Salomon, Schoesler, Short, Takko, Van De Wege, Wagoner, Warnick, Wellman, Wilson, C. and Zeiger

Excused: Senators Sheldon, Walsh and Wilson, L.

Michael S. Shiosaki, Senate Gubernatorial Appointment No. 9132, having received the constitutional majority was declared confirmed as a member of the Recreation and Conservation Funding Board.

MOTION

On motion of Senator Liias, the Senate reverted to the sixth

SEVENTY THIRD DAY, MARCH 27, 2019

2019 REGULAR SESSION

order of business.

SECOND READING

SUBSTITUTE HOUSE BILL NO. 1399, by House Committee on Labor & Workplace Standards (originally sponsored by Robinson, Doglio, Sells, Hudgins, Ormsby, Springer, Gregerson, Frame, Appleton, Bergquist, Riccelli, Tharinger, Stanford, Slatter, Goodman, Reeves, Macri and Ortiz-Self)

Concerning paid family and medical leave.

The measure was read the second time.

MOTION

On motion of Senator Keiser, the rules were suspended, Substitute House Bill No. 1399 was advanced to third reading, the second reading considered the third and the bill was placed on final passage.

Senators Keiser and King spoke in favor of passage of the bill.

The President declared the question before the Senate to be the final passage of Substitute House Bill No. 1399.

ROLL CALL

The Secretary called the roll on the final passage of Substitute House Bill No. 1399 and the bill passed the Senate by the following vote: Yeas, 40; Nays, 6; Absent, 0; Excused, 3.

Voting yea: Senators Bailey, Becker, Billig, Braun, Brown, Carlyle, Cleveland, Conway, Darneille, Das, Dhingra, Frockt, Hasegawa, Hawkins, Hobbs, Holy, Hunt, Keiser, King, Kuderer, Liias, Lovelett, McCoy, Mullet, Nguyen, O'Ban, Palumbo, Pedersen, Randall, Rivers, Rolfes, Saldaña, Salomon, Schoesler, Takko, Van De Wege, Wagoner, Wellman, Wilson, C. and Zeiger

Voting nay: Senators Ericksen, Fortunato, Honeyford, Padden, Short and Warnick

Excused: Senators Sheldon, Walsh and Wilson, L.

SUBSTITUTE HOUSE BILL NO. 1399, having received the constitutional majority, was declared passed. There being no objection, the title of the bill was ordered to stand as the title of the act.

MOTION

On motion of Senator Wilson, C., Senator Palumbo was excused.

SECOND READING

ENGROSSED SUBSTITUTE HOUSE BILL NO. 1099, by House Committee on Health Care & Wellness (originally sponsored by Jinkins, Cody, Tharinger, Robinson and Reeves)

Providing notice about network adequacy to consumers.

The measure was read the second time.

MOTION

On motion of Senator Cleveland, the rules were suspended, Engrossed Substitute House Bill No. 1099 was advanced to third reading, the second reading considered the third and the bill was placed on final passage.

Senators Cleveland, O'Ban, Wilson, C. and Darneille spoke in favor of passage of the bill.

The President declared the question before the Senate to be the final passage of Engrossed Substitute House Bill No. 1099.

ROLL CALL

The Secretary called the roll on the final passage of Engrossed Substitute House Bill No. 1099 and the bill passed the Senate by the following vote: Yeas, 45; Nays, 0; Absent, 0; Excused, 4.

Voting yea: Senators Bailey, Becker, Billig, Braun, Brown, Carlyle, Cleveland, Conway, Darneille, Das, Dhingra, Ericksen, Fortunato, Frockt, Hasegawa, Hawkins, Hobbs, Holy, Honeyford, Hunt, Keiser, King, Kuderer, Liias, Lovelett, McCoy, Mullet, Nguyen, O'Ban, Padden, Pedersen, Randall, Rivers, Rolfes, Saldaña, Salomon, Schoesler, Short, Takko, Van De Wege, Wagoner, Warnick, Wellman, Wilson, C. and Zeiger

Excused: Senators Palumbo, Sheldon, Walsh and Wilson, L.

ENGROSSED SUBSTITUTE HOUSE BILL NO. 1099, having received the constitutional majority, was declared passed. There being no objection, the title of the bill was ordered to stand as the title of the act.

SECOND READING

HOUSE BILL NO. 1349, by Representatives Schmick, Cody, Jinkins, Doglio and Leavitt

Clarifying the definition of a geriatric behavioral health worker for individuals with a bachelor's or master's degree in social work, behavioral health, or other related areas.

The measure was read the second time.

MOTION

On motion of Senator Dhingra, the rules were suspended, House Bill No. 1349 was advanced to third reading, the second reading considered the third and the bill was placed on final passage.

Senator Dhingra spoke in favor of passage of the bill.

The President declared the question before the Senate to be the final passage of House Bill No. 1349.

ROLL CALL

The Secretary called the roll on the final passage of House Bill No. 1349 and the bill passed the Senate by the following vote: Yeas, 45; Nays, 0; Absent, 0; Excused, 4.

Voting yea: Senators Bailey, Becker, Billig, Braun, Brown, Carlyle, Cleveland, Conway, Darneille, Das, Dhingra, Ericksen, Fortunato, Frockt, Hasegawa, Hawkins, Hobbs, Holy, Honeyford, Hunt, Keiser, King, Kuderer, Liias, Lovelett, McCoy, Mullet, Nguyen, O'Ban, Padden, Pedersen, Randall, Rivers, Rolfes, Saldaña, Salomon, Schoesler, Short, Takko, Van De Wege, Wagoner, Warnick, Wellman, Wilson, C. and Zeiger

Excused: Senators Palumbo, Sheldon, Walsh and Wilson, L.

HOUSE BILL NO. 1349, having received the constitutional majority, was declared passed. There being no objection, the title of the bill was ordered to stand as the title of the act.

MOTION

On motion of Senator Liias, the Senate advanced to the seventh order of business.

THIRD READING
CONFIRMATION OF GUBERNATORIAL APPOINTMENTS

MOTION

Senator Liias moved that Diana L. Clay, Senate Gubernatorial Appointment No. 9236, be confirmed as a member of the Edmonds Community College Board of Trustees.

Senator Liias spoke in favor of the motion.

APPOINTMENT OF DIANA L. CLAY

The President declared the question before the Senate to be the confirmation of Diana L. Clay, Senate Gubernatorial Appointment No. 9236, as a member of the Edmonds Community College Board of Trustees.

The Secretary called the roll on the confirmation of Diana L. Clay, Senate Gubernatorial Appointment No. 9236, as a member of the Edmonds Community College Board of Trustees and the appointment was confirmed by the following vote: Yeas, 45; Nays, 0; Absent, 0; Excused, 4.

Voting yea: Senators Bailey, Becker, Billig, Braun, Brown, Carlyle, Cleveland, Conway, Darneille, Das, Dhingra, Ericksen, Fortunato, Frockt, Hasegawa, Hawkins, Hobbs, Holy, Honeyford, Hunt, Keiser, King, Kuderer, Liias, Lovelett, McCoy, Mullet, Nguyen, O'Ban, Padden, Pedersen, Randall, Rivers, Rolfes, Saldaña, Salomon, Schoesler, Short, Takko, Van De Wege, Wagoner, Warnick, Wellman, Wilson, C. and Zeiger

Excused: Senators Palumbo, Sheldon, Walsh and Wilson, L.

Diana L. Clay, Senate Gubernatorial Appointment No. 9236, having received the constitutional majority was declared confirmed as a member of the Edmonds Community College Board of Trustees.

THIRD READING
CONFIRMATION OF GUBERNATORIAL APPOINTMENTS

MOTION

Senator King moved that Rosalinda Mendoza, Senate Gubernatorial Appointment No. 9149, be confirmed as a member of the Yakima Valley Community College Board of Trustees.

Senator King spoke in favor of the motion.

APPOINTMENT OF ROSALINDA MENDOZA

The President declared the question before the Senate to be the confirmation of Rosalinda Mendoza, Senate Gubernatorial Appointment No. 9149, as a member of the Yakima Valley Community College Board of Trustees.

The Secretary called the roll on the confirmation of Rosalinda Mendoza, Senate Gubernatorial Appointment No. 9149, as a member of the Yakima Valley Community College Board of Trustees and the appointment was confirmed by the following vote: Yeas, 45; Nays, 0; Absent, 0; Excused, 4.

Voting yea: Senators Bailey, Becker, Billig, Braun, Brown, Carlyle, Cleveland, Conway, Darneille, Das, Dhingra, Ericksen, Fortunato, Frockt, Hasegawa, Hawkins, Hobbs, Holy, Honeyford, Hunt, Keiser, King, Kuderer, Liias, Lovelett, McCoy, Mullet,

Nguyen, O'Ban, Padden, Pedersen, Randall, Rivers, Rolfes, Saldaña, Salomon, Schoesler, Short, Takko, Van De Wege, Wagoner, Warnick, Wellman, Wilson, C. and Zeiger

Excused: Senators Palumbo, Sheldon, Walsh and Wilson, L.

Rosalinda Mendoza, Gubernatorial Appointment No. 9149, having received the constitutional majority was declared confirmed as a member of the Yakima Valley Community College Board of Trustees.

MOTION

On motion of Senator Liias, the Senate reverted to the sixth order of business.

SECOND READING

SECOND SUBSTITUTE HOUSE BILL NO. 1497, by House Committee on Appropriations (originally sponsored by Robinson, Harris, Cody, Jinkins, DeBolt, Macri, Stonier, Corry, Riccelli, Thai, Kilduff, Stanford and Kloba)

Concerning foundational public health services.

The measure was read the second time.

MOTION

On motion of Senator Cleveland, the rules were suspended, Second Substitute House Bill No. 1497 was advanced to third reading, the second reading considered the third and the bill was placed on final passage.

Senators Cleveland, O'Ban and Becker spoke in favor of passage of the bill.

The President declared the question before the Senate to be the final passage of Second Substitute House Bill No. 1497.

ROLL CALL

The Secretary called the roll on the final passage of Second Substitute House Bill No. 1497 and the bill passed the Senate by the following vote: Yeas, 44; Nays, 1; Absent, 0; Excused, 4.

Voting yea: Senators Bailey, Billig, Braun, Brown, Carlyle, Cleveland, Conway, Darneille, Das, Dhingra, Ericksen, Fortunato, Frockt, Hasegawa, Hawkins, Hobbs, Holy, Honeyford, Hunt, Keiser, King, Kuderer, Liias, Lovelett, McCoy, Mullet, Nguyen, O'Ban, Padden, Pedersen, Randall, Rivers, Rolfes, Saldaña, Salomon, Schoesler, Short, Takko, Van De Wege, Wagoner, Warnick, Wellman, Wilson, C. and Zeiger

Voting nay: Senator Becker

Excused: Senators Palumbo, Sheldon, Walsh and Wilson, L.

SECOND SUBSTITUTE HOUSE BILL NO. 1497, having received the constitutional majority, was declared passed. There being no objection, the title of the bill was ordered to stand as the title of the act.

SECOND READING

HOUSE BILL NO. 1743, by Representatives Ormsby, Sells, Appleton, Fey, Tharinger and Kloba

Addressing the methodology for establishing the prevailing rate of wages for the construction of affordable housing, homeless and domestic violence shelters, and low-income weatherization

SEVENTY THIRD DAY, MARCH 27, 2019
and home rehabilitation public works.

2019 REGULAR SESSION

The measure was read the second time.

MOTION

Senator Conway moved that the following committee striking amendment by the Committee on Labor & Commerce be adopted:

Strike everything after the enacting clause and insert the following:

"NEW SECTION. Sec. 1. The legislature intends that the methodology for establishing the prevailing rates of wages under this act applies only to affordable housing, homeless and domestic violence shelters, and low-income weatherization and home rehabilitation programs.

Sec. 2. RCW 39.12.015 and 2018 c 248 s 1 and 2018 c 242 s 1 are each reenacted and amended to read as follows:

(1) All determinations of the prevailing rate of wage shall be made by the industrial statistician of the department of labor and industries.

(2) The time period for recovery of any wages owed to a worker affected by the determination is tolled until the prevailing wage determination is final.

(3)(a) Except as provided in section 3 of this act, and notwithstanding RCW 39.12.010(1), the industrial statistician shall establish the prevailing rate of wage by adopting the hourly wage, usual benefits, and overtime paid for the geographic jurisdiction established in collective bargaining agreements for those trades and occupations that have collective bargaining agreements. For trades and occupations with more than one collective bargaining agreement in the county, the higher rate will prevail.

~~((4))~~ (b) For trades and occupations in which there are no collective bargaining agreements in the county, the industrial statistician shall establish the prevailing rate of wage as defined in RCW 39.12.010 by conducting wage and hour surveys. In instances when there are no applicable collective bargaining agreements and conducting wage and hour surveys is not feasible, the industrial statistician may employ other appropriate methods to establish the prevailing rate of wage.

NEW SECTION. Sec. 3. A new section is added to chapter 39.12 RCW to read as follows:

(1) For residential construction, the industrial statistician shall establish the prevailing rate of wage by conducting wage and hour surveys. If the industrial statistician determines that information received from a survey is insufficient to determine the prevailing rate of wage for a trade under this subsection, the industrial statistician shall employ other appropriate methods to establish the prevailing rate of wage.

(a) The industrial statistician shall conduct the initial surveys required by this subsection (1) as soon as feasible after the effective date of this section. These surveys shall cover fiscal year 2018.

(b) The industrial statistician shall conduct a wage and hour survey following the initial survey or otherwise reestablish a prevailing rate of wage for each trade covered by this section at least every five years, and after the initial survey may stagger the surveys for workload purposes.

(2)(a) Until the industrial statistician has established a prevailing wage rate under subsection (1)(a) of this section and except as provided in (b) of this subsection, the industrial statistician shall establish the wage rate by:

(i) Identifying the residential prevailing wage rate in effect on August 30, 2018, for that trade (rate A);

(ii) Determining the year most recent to 2018, but not earlier than 2007, in which the wage rate for that trade was adjusted (year A);

(iii) Determining the percentage change in the annual average hourly wages reported for construction workers in Washington state, as calculated by the United States bureau of labor statistics' state and area employment, hours, and earnings estimates, from year A to 2019;

(iv) Adding the percentage change from (a)(iii) of this subsection to one hundred percent (percentage A); and

(v) Multiplying rate A by percentage A.

(b) If the residential construction wage rate in effect for a trade on August 31, 2018, is the same as the wage rate in effect on August 30, 2018, the industrial statistician must adopt the wage rate in effect for the trade on August 31, 2018, until a wage rate is established under subsection (1)(a) of this section.

(3) For purposes of this section:

(a) "Residential construction" means construction, alteration, repair, improvement, or maintenance of single-family dwellings, duplexes, apartments, condominiums, and other residential structures not to exceed four stories in height, including the basement, in the following categories:

(i) Affordable housing, including permanent supportive housing and transitional housing, which may include common spaces, community rooms, recreational spaces, a management office, or offices for the purposes of service delivery;

(ii) Weatherization and home rehabilitation programs for low-income households; and

(iii) Homeless shelters and domestic violence shelters.

(b) "Residential construction" does not include the utilities construction, such as water and sewer lines, or work on streets, or work on other structures unrelated to the housing.

NEW SECTION. Sec. 4. The industrial statistician must establish and publish wage rates under section 3(2) of this act within thirty days after the effective date of this section. The wage rates take effect thirty days after publication.

NEW SECTION. Sec. 5. This act is necessary for the immediate preservation of the public peace, health, or safety, or support of the state government and its existing public institutions, and takes effect immediately."

On page 1, line 4 of the title, after "works;" strike the remainder of the title and insert "reenacting and amending RCW 39.12.015; adding a new section to chapter 39.12 RCW; creating new sections; and declaring an emergency."

The President declared the question before the Senate to be the adoption of the committee striking amendment by the Committee on Labor & Commerce to House Bill No. 1743.

The motion by Senator Conway carried and the committee striking amendment was adopted by voice vote.

MOTION

On motion of Senator Conway, the rules were suspended, House Bill No. 1743 as amended by the Senate was advanced to third reading, the second reading considered the third and the bill was placed on final passage as amended by the Senate.

Senators Conway and King spoke in favor of passage of the bill.

The President declared the question before the Senate to be the final passage of House Bill No. 1743 as amended by the Senate.

ROLL CALL

The Secretary called the roll on the final passage of House Bill No. 1743 as amended by the Senate and the bill passed the Senate by the following vote: Yeas, 44; Nays, 1; Absent, 0; Excused, 4.

Voting yea: Senators Bailey, Becker, Billig, Braun, Brown, Carlyle, Cleveland, Conway, Darneille, Das, Dhingra, Ericksen, Fortunato, Frockt, Hawkins, Hobbs, Holy, Honeyford, Hunt, Keiser, King, Kuderer, Liias, Lovelett, McCoy, Mullet, Nguyen, O'Ban, Padden, Pedersen, Randall, Rivers, Rolfes, Saldaña, Salomon, Schoesler, Short, Takko, Van De Wege, Wagoner, Warnick, Wellman, Wilson, C. and Zeiger

Voting nay: Senator Hasegawa

Excused: Senators Palumbo, Sheldon, Walsh and Wilson, L.

HOUSE BILL NO. 1743, as amended by the Senate, having received the constitutional majority, was declared passed. There being no objection, the title of the bill was ordered to stand as the title of the act.

SECOND READING

SUBSTITUTE HOUSE BILL NO. 1870, by House Committee on Health Care & Wellness (originally sponsored by Davis, Cody, Ryu, Jinkins, Dolan, Senn, Bergquist, Peterson, Thai, Valdez, Morgan, Robinson, Goodman, Kilduff, Fey, Pollet, Appleton, Orwall, Mead, Kirby, Kloba, Gregerson, Fitzgibbon, Stanford and Tharinger)

Making state law consistent with selected federal consumer protections in the patient protection and affordable care act.

The measure was read the second time.

MOTION

Senator Cleveland moved that the following committee striking amendment by the Committee on Health & Long Term Care be adopted:

Strike everything after the enacting clause and insert the following:

"PART I DEFINITIONS

Sec. 1. RCW 48.43.005 and 2016 c 65 s 2 are each amended to read as follows:

Unless otherwise specifically provided, the definitions in this section apply throughout this chapter.

(1) "Adjusted community rate" means the rating method used to establish the premium for health plans adjusted to reflect actuarially demonstrated differences in utilization or cost attributable to geographic region, age, family size, and use of wellness activities.

(2) "Adverse benefit determination" means a denial, reduction, or termination of, or a failure to provide or make payment, in whole or in part, for a benefit, including a denial, reduction, termination, or failure to provide or make payment that is based on a determination of an enrollee's or applicant's eligibility to participate in a plan, and including, with respect to group health plans, a denial, reduction, or termination of, or a failure to provide or make payment, in whole or in part, for a benefit resulting from the application of any utilization review, as well as a failure to cover an item or service for which benefits are otherwise provided because it is determined to be experimental or investigational or not medically necessary or appropriate.

(3) "Applicant" means a person who applies for enrollment in an individual health plan as the subscriber or an enrollee, or the dependent or spouse of a subscriber or enrollee.

(4) "Basic health plan" means the plan described under chapter 70.47 RCW, as revised from time to time.

(5) "Basic health plan model plan" means a health plan as required in RCW 70.47.060(2)(e).

(6) "Basic health plan services" means that schedule of covered health services, including the description of how those benefits are to be administered, that are required to be delivered to an enrollee under the basic health plan, as revised from time to time.

(7) "Board" means the governing board of the Washington health benefit exchange established in chapter 43.71 RCW.

(8)(a) For grandfathered health benefit plans issued before January 1, 2014, and renewed thereafter, "catastrophic health plan" means:

(i) In the case of a contract, agreement, or policy covering a single enrollee, a health benefit plan requiring a calendar year deductible of, at a minimum, one thousand seven hundred fifty dollars and an annual out-of-pocket expense required to be paid under the plan (other than for premiums) for covered benefits of at least three thousand five hundred dollars, both amounts to be adjusted annually by the insurance commissioner; and

(ii) In the case of a contract, agreement, or policy covering more than one enrollee, a health benefit plan requiring a calendar year deductible of, at a minimum, three thousand five hundred dollars and an annual out-of-pocket expense required to be paid under the plan (other than for premiums) for covered benefits of at least six thousand dollars, both amounts to be adjusted annually by the insurance commissioner.

(b) In July 2008, and in each July thereafter, the insurance commissioner shall adjust the minimum deductible and out-of-pocket expense required for a plan to qualify as a catastrophic plan to reflect the percentage change in the consumer price index for medical care for a preceding twelve months, as determined by the United States department of labor. For a plan year beginning in 2014, the out-of-pocket limits must be adjusted as specified in section 1302(c)(1) of P.L. 111-148 of 2010, as amended. The adjusted amount shall apply on the following January 1st.

(c) For health benefit plans issued on or after January 1, 2014, "catastrophic health plan" means:

(i) A health benefit plan that meets the definition of catastrophic plan set forth in section 1302(e) of P.L. 111-148 of 2010, as amended; or

(ii) A health benefit plan offered outside the exchange marketplace that requires a calendar year deductible or out-of-pocket expenses under the plan, other than for premiums, for covered benefits, that meets or exceeds the commissioner's annual adjustment under (b) of this subsection.

(9) "Certification" means a determination by a review organization that an admission, extension of stay, or other health care service or procedure has been reviewed and, based on the information provided, meets the clinical requirements for medical necessity, appropriateness, level of care, or effectiveness under the auspices of the applicable health benefit plan.

(10) "Concurrent review" means utilization review conducted during a patient's hospital stay or course of treatment.

(11) "Covered person" or "enrollee" means a person covered by a health plan including an enrollee, subscriber, policyholder, beneficiary of a group plan, or individual covered by any other health plan.

(12) "Dependent" means, at a minimum, the enrollee's legal spouse and dependent children who qualify for coverage under the enrollee's health benefit plan.

(13) "Emergency medical condition" means a medical condition manifesting itself by acute symptoms of sufficient

SEVENTY THIRD DAY, MARCH 27, 2019

2019 REGULAR SESSION

severity, including severe pain, such that a prudent layperson, who possesses an average knowledge of health and medicine, could reasonably expect the absence of immediate medical attention to result in a condition (a) placing the health of the individual, or with respect to a pregnant woman, the health of the woman or her unborn child, in serious jeopardy, (b) serious impairment to bodily functions, or (c) serious dysfunction of any bodily organ or part.

(14) "Emergency services" means a medical screening examination, as required under section 1867 of the social security act (42 U.S.C. 1395dd), that is within the capability of the emergency department of a hospital, including ancillary services routinely available to the emergency department to evaluate that emergency medical condition, and further medical examination and treatment, to the extent they are within the capabilities of the staff and facilities available at the hospital, as are required under section 1867 of the social security act (42 U.S.C. 1395dd) to stabilize the patient. Stabilize, with respect to an emergency medical condition, has the meaning given in section 1867(e)(3) of the social security act (42 U.S.C. 1395dd(e)(3)).

(15) "Employee" has the same meaning given to the term, as of January 1, 2008, under section 3(6) of the federal employee retirement income security act of 1974.

(16) "Enrollee point-of-service cost-sharing" means amounts paid to health carriers directly providing services, health care providers, or health care facilities by enrollees and may include copayments, coinsurance, or deductibles.

(17) "Exchange" means the Washington health benefit exchange established under chapter 43.71 RCW.

(18) "Final external review decision" means a determination by an independent review organization at the conclusion of an external review.

(19) "Final internal adverse benefit determination" means an adverse benefit determination that has been upheld by a health plan or carrier at the completion of the internal appeals process, or an adverse benefit determination with respect to which the internal appeals process has been exhausted under the exhaustion rules described in RCW 48.43.530 and 48.43.535.

(20) "Grandfathered health plan" means a group health plan or an individual health plan that under section 1251 of the patient protection and affordable care act, P.L. 111-148 (2010) and as amended by the health care and education reconciliation act, P.L. 111-152 (2010) is not subject to subtitles A or C of the act as amended.

(21) "Grievance" means a written complaint submitted by or on behalf of a covered person regarding service delivery issues other than denial of payment for medical services or nonprovision of medical services, including dissatisfaction with medical care, waiting time for medical services, provider or staff attitude or demeanor, or dissatisfaction with service provided by the health carrier.

(22) "Health care facility" or "facility" means hospices licensed under chapter 70.127 RCW, hospitals licensed under chapter 70.41 RCW, rural health care facilities as defined in RCW 70.175.020, psychiatric hospitals licensed under chapter 71.12 RCW, nursing homes licensed under chapter 18.51 RCW, community mental health centers licensed under chapter 71.05 or 71.24 RCW, kidney disease treatment centers licensed under chapter 70.41 RCW, ambulatory diagnostic, treatment, or surgical facilities licensed under chapter 70.41 RCW, drug and alcohol treatment facilities licensed under chapter 70.96A RCW, and home health agencies licensed under chapter 70.127 RCW, and includes such facilities if owned and operated by a political subdivision or instrumentality of the state and such other facilities as required by federal law and implementing regulations.

(23) "Health care provider" or "provider" means:

(a) A person regulated under Title 18 or chapter 70.127 RCW, to practice health or health-related services or otherwise practicing health care services in this state consistent with state law; or

(b) An employee or agent of a person described in (a) of this subsection, acting in the course and scope of his or her employment.

(24) "Health care service" means that service offered or provided by health care facilities and health care providers relating to the prevention, cure, or treatment of illness, injury, or disease.

(25) "Health carrier" or "carrier" means a disability insurer regulated under chapter 48.20 or 48.21 RCW, a health care service contractor as defined in RCW 48.44.010, or a health maintenance organization as defined in RCW 48.46.020, and includes "issuers" as that term is used in the patient protection and affordable care act (P.L. 111-148).

(26) "Health plan" or "health benefit plan" means any policy, contract, or agreement offered by a health carrier to provide, arrange, reimburse, or pay for health care services except the following:

(a) Long-term care insurance governed by chapter 48.84 or 48.83 RCW;

(b) Medicare supplemental health insurance governed by chapter 48.66 RCW;

(c) Coverage supplemental to the coverage provided under chapter 55, Title 10, United States Code;

(d) Limited health care services offered by limited health care service contractors in accordance with RCW 48.44.035;

(e) Disability income;

(f) Coverage incidental to a property/casualty liability insurance policy such as automobile personal injury protection coverage and homeowner guest medical;

(g) Workers' compensation coverage;

(h) Accident only coverage;

(i) Specified disease or illness-triggered fixed payment insurance, hospital confinement fixed payment insurance, or other fixed payment insurance offered as an independent, noncoordinated benefit;

(j) Employer-sponsored self-funded health plans;

(k) Dental only and vision only coverage;

(l) Plans deemed by the insurance commissioner to have a short-term limited purpose or duration, or to be a student-only plan that is guaranteed renewable while the covered person is enrolled as a regular full-time undergraduate or graduate student at an accredited higher education institution, after a written request for such classification by the carrier and subsequent written approval by the insurance commissioner; and

(m) Civilian health and medical program for the veterans affairs administration (CHAMPVA).

(27) "Individual market" means the market for health insurance coverage offered to individuals other than in connection with a group health plan.

(28) "Material modification" means a change in the actuarial value of the health plan as modified of more than five percent but less than fifteen percent.

(29) "Open enrollment" means a period of time as defined in rule to be held at the same time each year, during which applicants may enroll in a carrier's individual health benefit plan without being subject to health screening or otherwise required to provide evidence of insurability as a condition for enrollment.

(30) "Preexisting condition" means any medical condition, illness, or injury that existed any time prior to the effective date of coverage.

(31) "Premium" means all sums charged, received, or deposited by a health carrier as consideration for a health plan or the continuance of a health plan. Any assessment or any "membership," "policy," "contract," "service," or similar fee or charge made by a health carrier in consideration for a health plan is deemed part of the premium. "Premium" shall not include amounts paid as enrollee point-of-service cost-sharing.

(32) "Review organization" means a disability insurer regulated under chapter 48.20 or 48.21 RCW, health care service contractor as defined in RCW 48.44.010, or health maintenance organization as defined in RCW 48.46.020, and entities affiliated with, under contract with, or acting on behalf of a health carrier to perform a utilization review.

(33) "Small employer" or "small group" means any person, firm, corporation, partnership, association, political subdivision, sole proprietor, or self-employed individual that is actively engaged in business that employed an average of at least one but no more than fifty employees, during the previous calendar year and employed at least one employee on the first day of the plan year, is not formed primarily for purposes of buying health insurance, and in which a bona fide employer-employee relationship exists. In determining the number of employees, companies that are affiliated companies, or that are eligible to file a combined tax return for purposes of taxation by this state, shall be considered an employer. Subsequent to the issuance of a health plan to a small employer and for the purpose of determining eligibility, the size of a small employer shall be determined annually. Except as otherwise specifically provided, a small employer shall continue to be considered a small employer until the plan anniversary following the date the small employer no longer meets the requirements of this definition. A self-employed individual or sole proprietor who is covered as a group of one must also: (a) Have been employed by the same small employer or small group for at least twelve months prior to application for small group coverage, and (b) verify that he or she derived at least seventy-five percent of his or her income from a trade or business through which the individual or sole proprietor has attempted to earn taxable income and for which he or she has filed the appropriate internal revenue service form 1040, schedule C or F, for the previous taxable year, except a self-employed individual or sole proprietor in an agricultural trade or business, must have derived at least fifty-one percent of his or her income from the trade or business through which the individual or sole proprietor has attempted to earn taxable income and for which he or she has filed the appropriate internal revenue service form 1040, for the previous taxable year.

(34) "Special enrollment" means a defined period of time of not less than thirty-one days, triggered by a specific qualifying event experienced by the applicant, during which applicants may enroll in the carrier's individual health benefit plan without being subject to health screening or otherwise required to provide evidence of insurability as a condition for enrollment.

(35) "Standard health questionnaire" means the standard health questionnaire designated under chapter 48.41 RCW.

(36) "Utilization review" means the prospective, concurrent, or retrospective assessment of the necessity and appropriateness of the allocation of health care resources and services of a provider or facility, given or proposed to be given to an enrollee or group of enrollees.

(37) "Wellness activity" means an explicit program of an activity consistent with department of health guidelines, such as, smoking cessation, injury and accident prevention, reduction of alcohol misuse, appropriate weight reduction, exercise, automobile and motorcycle safety, blood cholesterol reduction, and nutrition education for the purpose of improving enrollee health status and reducing health service costs.

(38) "Essential health benefit categories" means:

(a) Ambulatory patient services;

(b) Emergency services;

(c) Hospitalization;

(d) Maternity and newborn care;

(e) Mental health and substance use disorder services, including behavioral health treatment;

(f) Prescription drugs;

(g) Rehabilitative and habilitative services and devices;

(h) Laboratory services;

(i) Preventive and wellness services and chronic disease management; and

(j) Pediatric services, including oral and vision care.

PART II

GUARANTEED ISSUE AND ELIGIBILITY

Sec. 2. RCW 48.43.012 and 2011 c 315 s 3 are each amended to read as follows:

(1) No carrier may reject an individual for an individual or group health benefit plan based upon preexisting conditions of the individual (~~(except as provided in RCW 48.43.018)~~).

(2) No carrier may deny, exclude, or otherwise limit coverage for an individual's preexisting health conditions (~~(except as provided in this section)~~) including, but not limited to, preexisting condition exclusions or waiting periods.

(3) (~~(For an individual health benefit plan originally issued on or after March 23, 2000, preexisting condition waiting periods imposed upon a person enrolling in an individual health benefit plan shall be no more than nine months for a preexisting condition for which medical advice was given, for which a health care provider recommended or provided treatment, or for which a prudent layperson would have sought advice or treatment, within six months prior to the effective date of the plan. No carrier may impose a preexisting condition waiting period on an individual health benefit plan issued to an eligible individual as defined in section 2741(b) of the federal health insurance portability and accountability act of 1996 (42 U.S.C. 300gg-41(b)).~~)

~~(4) Individual health benefit plan preexisting condition waiting periods shall not apply to prenatal care services.~~

(5) No carrier may avoid the requirements of this section through the creation of a new rate classification or the modification of an existing rate classification. A new or changed rate classification will be deemed an attempt to avoid the provisions of this section if the new or changed classification would substantially discourage applications for coverage from individuals who are higher than average health risks. These provisions apply only to individuals who are Washington residents.

~~((6) For any person under age nineteen applying for coverage as allowed by RCW 48.43.0122(1) or enrolled in a health benefit plan subject to sections 1201 and 10103 of the patient protection and affordable care act (P.L. 111-148) that is not a grandfathered health plan in the individual market, a carrier must not impose a preexisting condition exclusion or waiting period or other limitations on benefits or enrollment due to a preexisting condition.))~~

(4) Unless preempted by federal law, the commissioner shall adopt any rules necessary to implement this section, consistent with federal rules and guidance in effect on January 1, 2017, implementing the patient protection and affordable care act.

NEW SECTION. **Sec. 3.** A new section is added to chapter 48.43 RCW to read as follows:

(1) A health carrier or health plan may not establish rules for eligibility, including continued eligibility, of any individual to enroll under the terms of the plan or coverage based on any of the

SEVENTY THIRD DAY, MARCH 27, 2019

2019 REGULAR SESSION

following health status-related factors in relation to the individual or a dependent of the individual:

- (a) Health status;
- (b) Medical condition, including both physical and mental illnesses;
- (c) Claims experience;
- (d) Receipt of health care;
- (e) Medical history;
- (f) Genetic information;
- (g) Evidence of insurability, including conditions arising out of acts of domestic violence;
- (h) Disability; or
- (i) Any other health status-related factor determined appropriate by the commissioner.

(2) Unless preempted by federal law, the commissioner shall adopt any rules necessary to implement this section, consistent with federal rules and guidance in effect on January 1, 2017, implementing the patient protection and affordable care act.

Sec. 4. RCW 48.21.270 and 2011 c 314 s 2 are each amended to read as follows:

(1) An insurer shall not require proof of insurability as a condition for issuance of the conversion policy.

(2) A conversion policy may not contain an exclusion for preexisting conditions for any applicant (~~who is under age nineteen. For policies issued to those age nineteen and older, an exclusion for a preexisting condition is permitted only to the extent that a waiting period for a preexisting condition has not been satisfied under the group policy~~).

(3) An insurer must offer at least three policy benefit plans that comply with the following:

- (a) A major medical plan with a five thousand dollar deductible per person;
- (b) A comprehensive medical plan with a five hundred dollar deductible per person; and
- (c) A basic medical plan with a one thousand dollar deductible per person.

(4) The insurance commissioner may revise the deductible amounts in subsection (3) of this section from time to time to reflect changing health care costs.

(5) The insurance commissioner shall adopt rules to establish minimum benefit standards for conversion policies.

(6) The commissioner shall adopt rules to establish specific standards for conversion policy provisions. These rules may include but are not limited to:

- (a) Terms of renewability;
- (b) Nonduplication of coverage;
- (c) Benefit limitations, exceptions, and reductions; and
- (d) Definitions of terms.

Sec. 5. RCW 48.44.380 and 2011 c 314 s 7 are each amended to read as follows:

(1) A health care service contractor shall not require proof of insurability as a condition for issuance of the conversion contract.

(2) A conversion contract may not contain an exclusion for preexisting conditions for any applicant (~~who is under age nineteen. For policies issued to those age nineteen and older, an exclusion for a preexisting condition is permitted only to the extent that a waiting period for a preexisting condition has not been satisfied under the group contract~~).

(3) A health care service contractor must offer at least three contract benefit plans that comply with the following:

- (a) A major medical plan with a five thousand dollar deductible per person;
- (b) A comprehensive medical plan with a five hundred dollar deductible per person; and

(c) A basic medical plan with a one thousand dollar deductible per person.

(4) The insurance commissioner may revise the deductible amounts in subsection (3) of this section from time to time to reflect changing health care costs.

(5) The insurance commissioner shall adopt rules to establish minimum benefit standards for conversion contracts.

(6) The commissioner shall adopt rules to establish specific standards for conversion contract provisions. These rules may include but are not limited to:

- (a) Terms of renewability;
- (b) Nonduplication of coverage;
- (c) Benefit limitations, exceptions, and reductions; and
- (d) Definitions of terms.

Sec. 6. RCW 48.46.460 and 2011 c 314 s 9 are each amended to read as follows:

(1) A health maintenance organization must offer a conversion agreement for comprehensive health care services and shall not require proof of insurability as a condition for issuance of the conversion agreement.

(2) A conversion agreement may not contain an exclusion for preexisting conditions for an applicant (~~who is under age nineteen. For policies issued to those age nineteen and older, an exclusion for a preexisting condition is permitted only to the extent that a waiting period for a preexisting condition has not been satisfied under the group agreement~~).

(3) A conversion agreement need not provide benefits identical to those provided under the group agreement. The conversion agreement may contain provisions requiring the person covered by the conversion agreement to pay reasonable deductibles and copayments, except for preventive service benefits as defined in 45 C.F.R. 147.130 (2010), implementing sections 2701 through 2763, 2791, and 2792 of the public health service act (42 U.S.C. 300gg through 300gg-63, 300gg-91, and 300gg-92), as amended.

(4) The insurance commissioner shall adopt rules to establish minimum benefit standards for conversion agreements.

(5) The commissioner shall adopt rules to establish specific standards for conversion agreement provisions. These rules may include but are not limited to:

- (a) Terms of renewability;
- (b) Nonduplication of coverage;
- (c) Benefit limitations, exceptions, and reductions; and
- (d) Definitions of terms.

NEW SECTION. Sec. 7. The following acts or parts of acts are each repealed:

(1) RCW 48.43.015 (Health benefit plans—Preexisting conditions) and 2012 c 64 s 2, 2004 c 192 s 5, 2001 c 196 s 7, 2000 c 80 s 3, 2000 c 79 s 20, & 1995 c 265 s 5;

(2) RCW 48.43.017 (Organ transplant benefit waiting periods—Prior creditable coverage) and 2009 c 82 s 2;

(3) RCW 48.43.018 (Requirement to complete the standard health questionnaire—Exemptions—Results) and 2012 c 211 s 16, 2012 c 64 s 1, 2010 c 277 s 1, & 2009 c 42 s 1; and

(4) RCW 48.43.025 (Group health benefit plans—Preexisting conditions) and 2001 c 196 s 9, 2000 c 79 s 23, & 1995 c 265 s 6.

PART III PROHIBITING UNFAIR RESCISSIONS

NEW SECTION. Sec. 8. A new section is added to chapter 48.43 RCW to read as follows:

(1) A health plan or health carrier offering group or individual coverage may not rescind such coverage with respect to an enrollee once the enrollee is covered under the plan or coverage involved, except that this section does not apply to a covered

person who has performed an act or practice that constitutes fraud or makes an intentional misrepresentation of material fact as prohibited by the terms of the plan or coverage. The plan or coverage may not be canceled except as permitted under RCW 48.43.035 or 48.43.038.

(2) The commissioner shall adopt any rules necessary to implement this section, consistent with federal rules and guidance in effect on January 1, 2017, implementing the patient protection and affordable care act.

PART IV ESSENTIAL HEALTH BENEFITS

Sec. 9. RCW 48.43.715 and 2013 c 325 s 1 are each amended to read as follows:

(1) ~~((Consistent with federal law.))~~ The commissioner, in consultation with the board and the health care authority, shall, by rule, select the largest small group plan in the state by enrollment as the benchmark plan for the individual and small group market for purposes of establishing the essential health benefits in Washington state ~~((under P.L. 111-148 of 2010, as amended)).~~

(2) If the essential health benefits benchmark plan for the individual and small group market does not include all of the ten essential health benefits categories ~~((specified by section 1302 of P.L. 111-148, as amended)),~~ the commissioner, in consultation with the board and the health care authority, shall, by rule, supplement the benchmark plan benefits as needed ~~((to meet the minimum requirements of section 1302)).~~

(3) ~~((A))~~ All individual and small group health plans ~~((required to offer))~~ must cover the ten essential health benefits categories, other than a health plan offered through the federal basic health program, a grandfathered health plan, or medicaid ~~((under P.L. 111-148 of 2010, as amended)).~~ Such a health plan may not be offered in the state unless the commissioner finds that it is substantially equal to the benchmark plan. When making this determination, the commissioner:

(a) Must ensure that the plan covers the ten essential health benefits categories ~~((specified in section 1302 of P.L. 111-148 of 2010, as amended));~~

(b) May consider whether the health plan has a benefit design that would create a risk of biased selection based on health status and whether the health plan contains meaningful scope and level of benefits in each of the ten essential health benefits categories ~~((specified by section 1302 of P.L. 111-148 of 2010, as amended));~~

(c) Notwithstanding ~~((the foregoing))~~ (a) and (b) of this subsection, for benefit years beginning January 1, 2015, ~~((and only to the extent permitted by federal law and guidance.))~~ must establish by rule the review and approval requirements and procedures for pediatric oral services when offered in stand-alone dental plans in the nongrandfathered individual and small group markets outside of the exchange; and

(d) ~~((Unless prohibited by federal law and guidance.))~~ Must allow health carriers to also offer pediatric oral services within the health benefit plan in the nongrandfathered individual and small group markets outside of the exchange.

(4) Beginning December 15, 2012, and every year thereafter, the commissioner shall submit to the legislature a list of state-mandated health benefits, the enforcement of which will result in federally imposed costs to the state related to the plans sold through the exchange because the benefits are not included in the essential health benefits designated under federal law. The list must include the anticipated costs to the state of each state-mandated health benefit on the list and any statutory changes needed if funds are not appropriated to defray the state costs for the listed mandate. The commissioner may enforce a mandate on

the list for the entire market only if funds are appropriated in an omnibus appropriations act specifically to pay the state portion of the identified costs.

PART V COST SHARING

NEW SECTION. Sec. 10. A new section is added to chapter 48.43 RCW to read as follows:

(1) For plan years beginning in 2020, the cost sharing incurred under a health plan for the essential health benefits may not exceed the following amounts:

(a) For self-only coverage:

(i) The amount required under federal law for the calendar year; or

(ii) If there are no cost-sharing requirements under federal law, eight thousand two hundred dollars increased by the premium adjustment percentage for the calendar year.

(b) For coverage other than self-only coverage:

(i) The amount required under federal law for the calendar year; or

(ii) If there are no cost-sharing requirements under federal law, sixteen thousand four hundred dollars increased by the premium adjustment percentage for the calendar year.

(2) Regardless of whether an enrollee is covered by a self-only plan or a plan that is other than self-only, the enrollee's cost sharing for the essential health benefits may not exceed the self-only annual limitation on cost sharing.

(3) For purposes of this section, "the premium adjustment percentage for the calendar year" means the percentage, if any, by which the average per capita premium for health insurance in Washington for the preceding year, as estimated by the commissioner no later than April 1st of such preceding year, exceeds such average per capita premium for 2020 as determined by the commissioner.

(4) Unless preempted by federal law, the commissioner shall adopt any rules necessary to implement this section, consistent with federal rules and guidance in effect on January 1, 2017, implementing the patient protection and affordable care act.

PART VI OPEN ENROLLMENT PERIODS

Sec. 11. RCW 48.43.0122 and 2011 c 315 s 4 are each amended to read as follows:

(1) The commissioner shall adopt rules establishing and implementing requirements for the open enrollment periods and special enrollment periods that carriers must follow for individual health benefit plans ~~((and enrollment of persons under age nineteen)).~~

(2) The commissioner shall monitor the sale of individual health benefit plans and if a carrier refuses to sell guaranteed issue policies to persons ~~((under age nineteen))~~ in compliance with rules adopted by the commissioner pursuant to subsection (1) of this section, the commissioner may levy fines or suspend or revoke a certificate of authority as provided in chapter 48.05 RCW.

PART VII LIFETIME LIMITS

NEW SECTION. Sec. 12. A new section is added to chapter 48.43 RCW to read as follows:

A health carrier may not impose annual or lifetime dollar limits on an essential health benefit, other than those permitted as reference-based limitations under rules adopted by the commissioner.

PART VIII

SEVENTY THIRD DAY, MARCH 27, 2019

2019 REGULAR SESSION

EXPLANATION OF COVERAGE

NEW SECTION. Sec. 13. A new section is added to chapter 48.43 RCW to read as follows:

(1) The commissioner shall develop standards for use by a health carrier offering individual or group coverage, in compiling and providing to applicants and enrollees a summary of benefits and coverage explanation that accurately describes the benefits and coverage under the applicable plan. In developing the standards, the commissioner must use the standards developed under 42 U.S.C. Sec. 300gg-15 in use on the effective date of this section.

(2) The standards must provide for the following:

(a) The standards must ensure that the summary of benefits and coverage is presented in a uniform format that does not exceed four pages in length and does not include print smaller than twelve-point font.

(b) The standards must ensure that the summary is presented in a culturally and linguistically appropriate manner and utilizes terminology understandable by the average plan enrollee.

(c) The standards must ensure that the summary of benefits and coverage includes:

(i) Uniform definitions of standard insurance and medical terms, consistent with the standard definitions developed under this section, so that consumers may compare health insurance coverage and understand the terms of coverage, or exceptions to such coverage;

(ii) A description of the coverage, including cost sharing for:

(A) The essential health benefits; and

(B) Other benefits identified by the commissioner;

(iii) The exceptions, reductions, and limitations on coverage;

(iv) The cost-sharing provisions, including deductible, coinsurance, and copayment obligations;

(v) The renewability and continuation of coverage provisions;

(vi) A coverage facts label that includes examples to illustrate common benefits scenarios, including pregnancy and serious or chronic medical conditions and related cost sharing. The scenarios must be based on recognized clinical practice guidelines;

(vii) A statement of whether the plan:

(A) Provides minimum essential coverage under 26 U.S.C. Sec. 5000A(f); and

(B) Ensures that the plan share of the total allowed costs of benefits provided under the plan is no less than sixty percent of the costs;

(viii) A statement that the outline is a summary of the policy or certificate and that the coverage document itself should be consulted to determine the governing contractual provisions; and

(ix) A contact number for the consumer to call with additional questions and a web site where a copy of the actual individual coverage policy or group certificate of coverage may be reviewed and obtained.

(3) The commissioner shall periodically review and update the standards developed under this section.

(4) A health carrier must provide a summary of benefits and coverage explanation to:

(a) An applicant at the time of application;

(b) An enrollee prior to the time of enrollment or reenrollment, as applicable; and

(c) A policyholder or certificate holder at the time of issuance of the policy or delivery of the certificate.

(5) A health carrier may provide the summary of benefits and coverage either in paper or electronically.

(6) If a health carrier makes any material modification in any of the terms of the plan that is not reflected in the most recently provided summary of benefits and coverage, the carrier shall

provide notice of the modification to enrollees no later than sixty days prior to the date on which the modification will become effective.

(7) A health carrier that fails to provide the information required under this section is subject to a fine of no more than one thousand dollars for each failure. A failure with respect to each enrollee constitutes a separate offense for purposes of this subsection.

(8) The commissioner shall, by rule, provide for the development of standards for the definitions of terms used in health insurance coverage, including the following:

(a) Insurance-related terms, including premium; deductible; coinsurance; copayment; out-of-pocket limit; preferred provider; nonpreferred provider; out-of-network copayments; usual, customary, and reasonable fees; excluded services; grievance; appeals; and any other terms the commissioner determines are important to define so that consumers may compare health insurance coverage and understand the terms of their coverage; and

(b) Medical terms, including hospitalization, hospital outpatient care, emergency room care, physician services, prescription drug coverage, durable medical equipment, home health care, skilled nursing care, rehabilitation services, hospice services, emergency medical transportation, and any other terms the commissioner determines are important to define so that consumers may compare the medical benefits offered by health insurance and understand the extent of those medical benefits or exceptions to those benefits.

(9) Unless preempted by federal law, the commissioner shall adopt any rules necessary to implement this section, consistent with federal rules and guidance in effect on January 1, 2017, implementing the patient protection and affordable care act.

PART IX**WAITING PERIODS FOR GROUP COVERAGE**

NEW SECTION. Sec. 14. A new section is added to chapter 48.43 RCW to read as follows:

(1) A group health plan and a health carrier offering group health coverage may not apply any waiting period that exceeds ninety days.

(2) Unless preempted by federal law, the commissioner shall adopt any rules necessary to implement this section, consistent with federal rules and guidance in effect on January 1, 2017, implementing the patient protection and affordable care act.

PART X**PROHIBITING ISSUER AND HEALTH PLAN DISCRIMINATION**

NEW SECTION. Sec. 15. A new section is added to chapter 48.43 RCW to read as follows:

(1) A health carrier offering a nongrandfathered health plan in the individual or small group market may not:

(a) In its benefit design or implementation of its benefit design, discriminate against individuals because of their age, expected length of life, present or predicted disability, degree of medical dependency, quality of life, or other health conditions; and

(b) With respect to the health plan, discriminate on the basis of race, color, national origin, disability, age, sex, gender identity, or sexual orientation.

(2) Nothing in this section may be construed to prevent an issuer from appropriately utilizing reasonable medical management techniques.

(3) Unless preempted by federal law, the commissioner shall adopt any rules necessary to implement this section, consistent

with federal rules and guidance in effect on January 1, 2017, implementing the patient protection and affordable care act.

NEW SECTION. Sec. 16. A new section is added to chapter 43.71 RCW to read as follows:

(1) For qualified health plans, an issue offering a qualified health plan may not employ marketing practices or benefit designs that have the effect of discouraging enrollment in the plan by individuals with significant health needs.

(2) Unless preempted by federal law, the commissioner shall adopt any rules necessary to implement this section, consistent with federal rules and guidance in effect on January 1, 2017, implementing the patient protection and affordable care act."

On page 1, line 3 of the title, after "act;" strike the remainder of the title and insert "amending RCW 48.43.005, 48.43.012, 48.21.270, 48.44.380, 48.46.460, 48.43.715, and 48.43.0122; adding new sections to chapter 48.43 RCW; adding a new section to chapter 43.71 RCW; repealing RCW 48.43.015, 48.43.017, 48.43.018, and 48.43.025; and prescribing penalties."

MOTION

Senator O'Ban moved that the following amendment no. 415 by Senator O'Ban be adopted:

On page 1, after line 2, strike all of sections 1 through 11.

On page 15, after line 19, strike all of sections 13 through 16.

Renumber the remaining sections consecutively and correct any internal references accordingly.

Senators O'Ban and Fortunato spoke in favor of adoption of the amendment to the committee striking amendment.

Senators Cleveland and Keiser spoke against adoption of the amendment to the committee striking amendment.

The President declared the question before the Senate to be the adoption of amendment no. 415 by Senator O'Ban on page 1, after line 2 to the striking amendment by the Committee on Health & Long Term Care.

The motion by Senator O'Ban did not carry and amendment no. 415 was not adopted by voice vote.

MOTION

Senator O'Ban moved that the following amendment no. 416 by Senator O'Ban be adopted:

On page 1, after line 2, strike all of section 1.

On page 13, after line 5, strike all of sections 8 through 16.

Renumber the remaining sections consecutively and correct any internal references accordingly.

Senator O'Ban spoke in favor of adoption of the amendment to the committee striking amendment.

Senator O'Ban demanded a roll call.

The President declared that one-sixth of the members supported the demand and the demand was sustained.

Senators Cleveland, Frockt and Liias spoke against adoption of the amendment to the committee striking amendment.

The President declared the question before the Senate to be the adoption of the amendment by Senator O'Ban on page 1, after line 2 to the striking amendment by the Committee on Health & Long Term Care.

ROLL CALL

The Secretary called the roll on the adoption of the amendment by Senator O'Ban and the amendment was not adopted by the following vote: Yeas, 14; Nays, 31; Absent, 0; Excused, 4.

Voting yea: Senators Becker, Brown, Ericksen, Fortunato, Hawkins, Holy, Honeyford, O'Ban, Padden, Schoesler, Short, Wagoner, Warnick and Zeiger

Voting nay: Senators Bailey, Billig, Braun, Carlyle, Cleveland, Conway, Darneille, Das, Dhingra, Frockt, Hasegawa, Hobbs, Hunt, Keiser, King, Kuderer, Liias, Lovelett, McCoy, Mullet, Nguyen, Pedersen, Randall, Rivers, Rolfes, Saldaña, Salomon, Takko, Van De Wege, Wellman and Wilson, C.

Excused: Senators Palumbo, Sheldon, Walsh and Wilson, L.

WITHDRAWAL OF AMENDMENT

On motion of Senator O'Ban and without objection, amendment no. 417 by Senator O'Ban on page 8, line 27 to the striking amendment by the Committee on Health & Long Term Care was withdrawn.

MOTION

Senator Cleveland moved that the following amendment no. 414 by Senator Cleveland be adopted:

On page 20, after line 2, insert the following:

NEW SECTION. Sec. 17. This act is necessary for the immediate preservation of the public peace, health, or safety, or support of the state government and its existing public institutions, and takes effect immediately."

On page 20, line 8, after "48.43.025;" strike "and prescribing penalties" and insert "prescribing penalties; and declaring an emergency"

Senator Cleveland spoke in favor of adoption of the amendment to the committee striking amendment.

The President declared the question before the Senate to be the adoption of amendment no. 414 by Senator Cleveland on page 20, after line 2 to the striking amendment by the Committee on Health & Long Term Care.

The motion by Senator Cleveland carried and amendment no. 414 was adopted by voice vote.

The President declared the question before the Senate to be the adoption of the committee striking amendment by the Committee on Health & Long Term Care as amended to Substitute House Bill No. 1870.

The motion by Senator Cleveland carried and the committee striking amendment as amended was adopted by voice vote.

MOTION

On motion of Senator Cleveland, the rules were suspended, Substitute House Bill No. 1870 as amended by the Senate was advanced to third reading, the second reading considered the third and the bill was placed on final passage as amended by the Senate.

Senators Cleveland, Conway and Liias spoke in favor of passage of the bill.

Senators Becker, Rivers, Ericksen and Fortunato spoke against passage of the bill.

The President declared the question before the Senate to be the final passage of Substitute House Bill No. 1870 as amended by the Senate.

SEVENTY THIRD DAY, MARCH 27, 2019

2019 REGULAR SESSION

ROLL CALL

The Secretary called the roll on the final passage of Substitute House Bill No. 1870 as amended by the Senate and the bill passed the Senate by the following vote: Yeas, 28; Nays, 17; Absent, 0; Excused, 4.

Voting yea: Senators Billig, Carlyle, Cleveland, Conway, Darneille, Das, Dhingra, Frockt, Hasegawa, Hobbs, Hunt, Keiser, Kuderer, Lias, Lovelett, McCoy, Mullet, Nguyen, O'Ban, Pedersen, Randall, Rolfes, Saldaña, Salomon, Takko, Van De Wege, Wellman and Wilson, C.

Voting nay: Senators Bailey, Becker, Braun, Brown, Ericksen, Fortunato, Hawkins, Holy, Honeyford, King, Padden, Rivers, Schoesler, Short, Wagoner, Warnick and Zeiger

Excused: Senators Palumbo, Sheldon, Walsh and Wilson, L.

SUBSTITUTE HOUSE BILL NO. 1870, as amended by the Senate, having received the constitutional majority, was declared passed. There being no objection, the title of the bill was ordered to stand as the title of the act.

SECOND READING

ENGROSSED HOUSE BILL NO. 1074, by Representatives Harris, Orwall, Riccelli, Jinkins, DeBolt, Pollet, Stonier, Stanford, Rude, Davis, Tharinger, Macri, Slatter, Kloba, Peterson, Valdez, Kilduff, Ryu, Fitzgibbon, Robinson, Appleton, Wylie, Cody, Bergquist, Doglio, Senn, Frame, Walen and Callan

Protecting youth from tobacco products and vapor products by increasing the minimum legal age of sale of tobacco and vapor products.

The measure was read the second time.

WITHDRAWAL OF AMENDMENT

On motion of Senator Padden and without objection, amendment no. 418 by Senator Padden on page 1, line 10 to Engrossed House Bill No. 1074 was withdrawn.

MOTION

Senator Padden moved that the following amendment no. 419 by Senator Padden be adopted:

On page 1, line 10, after (1), insert "Except as provided in subsection (4) of this section"

On page 1, after line 18, insert the following:

"(4) A person may sell or give, or permit to be sold or given, any cigar, cigarette, cigarette paper or wrapper, tobacco in any form, or a vapor product to any person eighteen years or older if that person is a service member or veteran of the United States armed services."

Senator Padden spoke in favor of adoption of the amendment. Senators Kuderer and Hobbs spoke against adoption of the amendment.

MOTION

On motion of Senator Rivers, Senator Honeyford was excused.

The President declared the question before the Senate to be the adoption of amendment no. 419 by Senator Padden on page 1, line 10 to Engrossed House Bill No. 1074.

The motion by Senator Padden did not carry and amendment no. 419 was not adopted by voice vote.

MOTION

Senator Ericksen moved that the following amendment no. 413 by Senator Ericksen be adopted:

On page 10, after line 10, insert the following:

"**Sec. 12.** RCW 70.155.080 and 2002 c 175 s 47 are each amended to read as follows:

(1) A person under the age of (~~eighteen~~) twenty-one who purchases or attempts to purchase, possesses, or obtains or attempts to obtain cigarettes or tobacco products commits a class 3 civil infraction under chapter 7.80 RCW and is subject to a fine as set out in chapter 7.80 RCW or participation in up to four hours of community restitution, or both. The court may also require participation in a smoking cessation program. This provision does not apply if a person under the age of eighteen, with parental authorization, is participating in a controlled purchase as part of a *liquor control board, law enforcement, or local health department activity.

(2) Municipal and district courts within the state have jurisdiction for enforcement of this section.

Sec. 13. RCW 70.345.140 and 2016 sp.s. c 38 s 14 are each amended to read as follows:

(1) A person under the age of (~~eighteen~~) twenty-one who purchases or attempts to purchase, possesses, or obtains or attempts to obtain vapor products commits a class 3 civil infraction under chapter 7.80 RCW and is subject to a fine as set out in chapter 7.80 RCW or participation in up to four hours of community restitution, or both. The court may also require participation in a smoking cessation program. This provision does not apply if a person under the age of eighteen, with parental authorization, is participating in a controlled purchase as part of a board, law enforcement, or local health department activity.

(2) Municipal and district courts within the state have jurisdiction for enforcement of this section."

Renumber the remaining sections accordingly.

Senator Ericksen spoke in favor of adoption of the amendment. Senator Kuderer spoke against adoption of the amendment.

The President declared the question before the Senate to be the adoption of amendment no. 413 by Senator Ericksen on page 10, after line 10 to Engrossed House Bill No. 1074.

The motion by Senator Ericksen did not carry and amendment no. 413 was not adopted by voice vote.

MOTION

On motion of Senator Kuderer, the rules were suspended, Engrossed House Bill No. 1074 was advanced to third reading, the second reading considered the third and the bill was placed on final passage.

Senators Kuderer and Rivers spoke in favor of passage of the bill.

Senator Fortunato spoke against passage of the bill.

MOTION

On motion of Senator Wilson, C., Senator Mullet was excused.

Senators Ericksen and Hasegawa spoke against passage of the bill.

The President declared the question before the Senate to be the final passage of Engrossed House Bill No. 1074.

ROLL CALL

The Secretary called the roll on the final passage of Engrossed House Bill No. 1074 and the bill passed the Senate by the following vote: Yeas, 33; Nays, 12; Absent, 0; Excused, 4.

Voting yea: Senators Bailey, Billig, Braun, Carlyle, Cleveland, Conway, Darneille, Das, Dhingra, Frockt, Hawkins, Hobbs, Hunt, Keiser, King, Kuderer, Liias, Lovelett, McCoy, Mullet, Nguyen, O'Ban, Pedersen, Randall, Rivers, Rolfes, Saldaña, Short, Takko, Van De Wege, Wellman, Wilson, C. and Zeiger

Voting nay: Senators Becker, Brown, Ericksen, Fortunato, Hasegawa, Holy, Honeyford, Padden, Salomon, Schoesler, Wagoner and Warnick

Excused: Senators Palumbo, Sheldon, Walsh and Wilson, L.

ENGROSSED HOUSE BILL NO. 1074, having received the constitutional majority, was declared passed. There being no objection, the title of the bill was ordered to stand as the title of the act.

MOTION

At 2:00 p.m., on motion of Senator Liias, the Senate adjourned until 12:00 o'clock noon Thursday, March 28, 2019.

CYRUS HABIB, President of the Senate

BRAD HENDRICKSON, Secretary of the Senate

1071-S	Committee Report.....	1	Committee Report.....	3	
1074-E	Other Action.....	17	1497-S2	Second Reading	8
	Second Reading	17		Third Reading Final Passage	9
	Third Reading Final Passage	18	1498-S3	Committee Report.....	3
1075-S	Other Action.....	6	1510-SE	Committee Report.....	3
1092	Committee Report.....	1	1533	Committee Report.....	3
1099-SE	Second Reading	7	1543-S2E	Committee Report.....	3
	Third Reading Final Passage	7	1557-SE	Committee Report.....	3
1105-S2E	Committee Report.....	1	1563-E	Committee Report.....	3
1112-S2E	Committee Report.....	1	1569-SE	Committee Report.....	3
1148-S	Committee Report.....	1	1578-SE	Committee Report.....	4
1208	Committee Report.....	2	1583	Committee Report.....	4
1332-SE	Committee Report.....	2		Committee Report.....	4
1341	Committee Report.....	2	1634	Committee Report.....	4
1349	Second Reading	7	1743	Other Action.....	10
	Third Reading Final Passage	8		Second Reading	9
1360-S	Committee Report.....	2		Third Reading Final Passage	10
1397	Committee Report.....	2	1870-S	Other Action.....	16, 17
1399-S	Second Reading	7		Second Reading	10, 16
	Third Reading Final Passage	7		Third Reading Final Passage	17
1406-S	Committee Report.....	2	1909-S	Committee Report.....	4
1428-SE	Committee Report.....	2	1918	Committee Report.....	4
1444-S2	Committee Report.....	2	5994	Introduction & 1st Reading.....	4
1469-S	Committee Report.....	2	8210	Introduction & 1st Reading.....	4
1480-S	Committee Report.....	3	8635	Adopted.....	5
1486				Introduced	4
			8636	Adopted.....	6
				Introduced	5

9132 Shiosaki, Michael S.
 Confirmed 6

9134 Willhite, Theodore R.
 Confirmed 6

9149 Mendoza, Rosalinda
 Confirmed 8

9236 Clay, Diana L.
 Confirmed 8

CHAPLAIN OF THE DAY
 Brewer, Col. Don, Chaplain, Washington
 Army National Guard 1

FLAG BEARERS
 Washington National Guard Joint Color
 Guard..... 1

GUESTS
 Bills, Mr. Shawn, State Director, Ofc of U.S.
 Senator Patty Murray 5

Daugherty, Maj. Gen. Bret, Washington
 National Guard..... 1

Jewell, Mr. Paul, former Kittitas County
 Commissioner 5

Osiadaez, Ms. Laura, Kittitas County
 Commissioner 5

Sabatine, Col. Jeff, Washington National
 Guard..... 1

Thurston, Miss Tracey, First Sergeant,
 Washington Air National Guard 1

Wachsmith, Mr. Brett, Kittitas County
 Commissioner 5

Wright, Mr. Cory, Kittitas County
 Commissioner 5

WASHINGTON STATE SENATE
 Personal Privilege, Senator Honeyford..... 6